

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Northern District of Illinois

Case number (if known):

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

F I L E D
 UNITED STATES BANKRUPTCY COURT
 NORTHERN DISTRICT OF ILLINOIS

AUG 09 2018

JEFFREY P. ALLSTEADT, CLERK
 INTAKE 1

Check if this is an
 amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

About Debtor 1:

First name David
 Middle name E.
 Last name Sanders
 Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name _____
 Middle name _____
 Last name _____
 Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First name _____
 Middle name _____
 Last name _____
 First name _____
 Middle name _____
 Last name _____

First name _____
 Middle name _____
 Last name _____
 First name _____
 Middle name _____
 Last name _____

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 9484

OR

9 xx - xx - _____

xxx - xx - _____

OR

9 xx - xx - _____

Debtor 1

David E. Sanders

First Name Middle Name Last Name

Page 2 of 18

Case number (if known) _____

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

About Debtor 1:



I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

5. Where you live

Number _____ Street _____

200665
 Crescent Ave
 Lynwood IL 60411
 COOK

City _____ State _____ ZIP Code _____

County _____

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number _____ Street _____

P.O. Box _____

City _____ State _____ ZIP Code _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

County _____

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number _____ Street _____

P.O. Box _____

City _____ State _____ ZIP Code _____

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

David E. Sanders

First Name Middle Name Last Name

Part 2: Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No

Yes. District _____ When _____ Case number _____
 MM / DD / YYYY
 District _____ When _____ Case number _____
 MM / DD / YYYY
 District _____ When _____ Case number _____
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No

Yes. Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 MM / DD / YYYY
 Debtor _____ Relationship to you _____
 District _____ When _____ Case number, if known _____
 MM / DD / YYYY

11. Do you rent your residence?

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

David E. Sanders

First Name

Middle Name

Last Name

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

No. Go to Part 4.

Yes. Name and location of business

Name of business, if any

Number Street

City

State

ZIP Code

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No

Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property?

Number Street

City State ZIP Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes**16. What kind of debts do you have?****16a. Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.**17. Are you filing under Chapter 7?**

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No
 Yes

18. How many creditors do you estimate that you owe?

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 X

Signature of Debtor 1

Executed on 08/09/2018

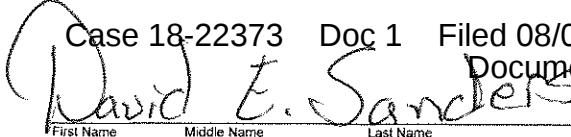
MM / DD / YYYY

Signature of Debtor 2

Executed on

MM / DD / YYYY

Debtor 1



David E. Sanders

First Name Middle Name

Last Name

Page 7 of 18

Case number (if known)

For your attorney, if you are represented by one**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.



Signature of Attorney for Debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

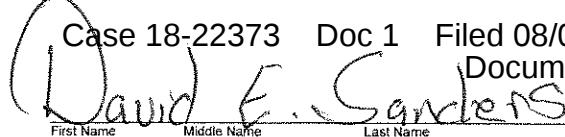
ZIP Code

Contact phone

Email address

Bar number

State



Case 18-22373 Doc 1 Filed 08/09/18 Entered 08/09/18 09:49:48 Desc Main
 Document Page 8 of 18

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

No
 Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

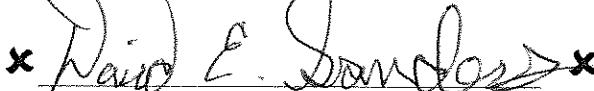
No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

No
 Yes. Name of Person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.



Signature of Debtor 1

Signature of Debtor 2

Date

08-09-2018
 MM / DD / YYYY

Date

MM / DD / YYYY

Contact phone

708-970-0289

Contact phone

 MM / DD / YYYY

Cell phone

312-597-8686

Cell phone

 MM / DD / YYYY

Email address

Silverdollar9484@yahoo.com

Email address

 MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

In Re: David E. Sanders

Debtor (s)

) Case No.

) Chapter

)

List of Creditors

First Premier Bank # 517800626809 XXXX \$ 800.00	First Premier Bank 601 S. Minnesota Ave Sioux Falls, SD 57104 (605) 367-3440
Fifth Third Bank # 544400230948 XXXX \$ 500.00	Fifth Third Bank 5050 Kingsley DR. Cincinnati, OH 45227
Ingalls Memorial Hospital # 2863667-1 \$ 200.00	Ingalls Memorial Hospital Payment Processing Center P.O. Box 27685 Chicago, IL 60673-1276
City of Chicago - Department of Finance # 66161981 \$ 1000.00	City of Chicago - Department of Finance P.O. Box 5625 Chicago, IL 60680-5625
Village of South Holland # 401575 # 513979 \$ 500.00	Village of South Holland P.O. Box 1053 Mokena, IL 60448 (708) 478-5694

Debtor 1

Cook Recorder of Deeds # 1608401079 \$ 5,000.00	COOK RECORDER OF DEEDS 118 N. CLARK ROOM 230 CHICAGO, IL 60602
First Premier Bank # 517800626809 \$ 1,000.00	First Premier Bank 3820 N. Louise Ave Sioux Falls, SD 57107
Midland Funding LLC # 8563514741 \$ 2,000.00	Midland Funding L.L.C. 2365 Northside Drive Suite 300 San Diego, CA 92108
Vision Financial Service # 1021178 \$ 200.00	Vision financial P.O. BOX 1768 LaPorte, IN 46352-1768
Enterprise Holdings Inc # 7270021 \$ 5,000.00	Enterprise Holding Inc 600 Corporate Park Drive St. Louis, MO
L.J. Ross Associates # 15529842 \$ 300.00	L.J. Ross ASSOCIATES 4 Universal Way Jackson, MI 49202
E.R.C. # 159663418 \$ 300.00	ERC P.O. Box 57547 Jacksonville, FL 32241
Clerk of the Court # TH003726 \$ 1,000.00	Clerk of the Court 10220 S. 76 th Ave Room 403 Bridgeview, IL 60455
Clerk of the Court # YE 474-482 \$ 1,000.00 480	Clerk of the Court 10220 S. 76 th AVE Room 208 Bridgeview, IL 60455
Office of the Secretary of State # Th003726 # 16TR0003726 \$ 1,000.00	Office of the Secretary of State 2701 Dirksen Parkway Springfield, IL 62703

Debtor 1

<p>IN the Circuit Court of Cook County Illinois 5th district # 16M152347 \$ 5,000.00</p>	<p>IN the Circuit Court of Cook County Illinois 5th District 10220 S. 76th Ave Bridgeview, IL 60455</p>
<p>Arnold Scott Harris P.C. ATTORNEYS AT LAW # 6044756678 \$ 500.00</p>	<p>Arnold Scott Harris P.C. ATTORNEY AT LAW 111 West Jackson Blvd, Ste 600 Chicago, IL 60604-4135</p>
<p>Village of Hazel Crest #17-234769 \$ 1,000.00</p>	<p>Village of Hazel Crest P.O. Box 457 Wheeling, IL 60090-0457</p>
<p>Penn Credit # RT00705023 \$ 500.00</p>	<p>Penn Credit P.O. Box 988 Harrisburg, PA 17108</p>
<p>Office of the Secretary of State of Illinois # 60438 # 17CF0438010 \$ 1,000.00</p>	<p>Office of the Secretary of State 2701 S. Dirksen Parkway Springfield, IL 62723</p>
<p>Office of the Secretary of the State of Illinois # YE474481 # 16TR047481 \$ 1,000.00</p>	<p>Office of the Secretary of the State of Illinois 2701 S. Dirksen Pkwy Springfield, IL 62723</p>
<p>Municipal Collection # 000202860 Services \$ 500.00</p>	<p>Municipal Collection Services P.O. Box 327 Palos Heights, IL 60463</p>
<p>IN the city of Chicago Illinois Department of Administrative Hearings # 16VPO05015 \$ 5,000.00</p>	<p>Dept. of Administrative Hearings 400 W. Superior Chicago, IL 60602</p>
<p>City of Markham, Illinois Photo enforcement Programs # 1703000436607243 \$ 500.00</p>	<p>Photo enforcement Program P.O. Box 577 Bedford Park, IL 60499-0577</p>
<p>Cook Law Magistrate Chicago # 14M1112500 \$ 1,000.00</p>	<p>Cook Law Magistrate Chicago 50 W. Washington Street Room - Chicago, IL 60602</p>

Debtor 1

<p>City of Chicago Department of Finance # 5188643520 \$ 1,000.00</p>	<p>Department of Finance Room 107 City Hall 121 N. LaSalle Street Chicago, IL 60602</p>
<p>Markoff Law LLC Robert G. Markoff # 05-MI 150606 \$ 10,000.00</p>	<p>Markoff Law LLC Robert G. Markoff 29 N. Wacker Drive # 55982 Chicago, IL 60606</p>
<p>Illinois Tollway # VW16098550D \$ 1,000.00</p>	<p>Illinois Tollway P.O. Box 5544 Chicago, IL 60680-5544</p>
<p>Professional Account Management # 68562335 # 02526671003953 \$ 1,000.00</p>	<p>Professional Account Management P.O. Box 741 Milwaukee, WI 53201-1487</p>
<p>Illinois Department of Healthcare and Family Services # C00711340 # 1994D0068138 \$ 3,000.00</p>	<p>Illinois Department of Healthcare and Family Services P.O. Box 19152 Springfield, IL 62794-9152</p>
<p>National Recovery Solutions # 09977898361 \$ 500.00</p>	<p>National Recovery Solutions P.O. Box 322 Lockport, NY 14095-0322</p>
<p>Arnold Scott Harris, P.C. Attorneys At Law # 2957759 \$ 3,000.00</p>	<p>Arnold Scott Harris, P.C. Attorneys At Law 111 West Jackson Blv Ste. 600 Chicago, IL 60604-4135</p>
<p>South Shore Hospital # V00163704687 \$ 2,000.00</p>	<p>South Shore Hospital 8012 S. Crandon Ave Chicago, IL 60617</p>
<p>Cook County Department of Revenue # 705023 \$ 500.00</p>	<p>Cook County Department of Revenue Non-Retailer Use Tax 26335 Network Place Chicago, IL 60673-1263</p>
<p>Arnold Scott Harris P.C. Attorneys At Law # 65508657 \$ 5,000.00</p>	<p>Arnold Scott Harris P.C. Attorneys At Law 111 West Jackson Blv Ste. 600 Chicago, IL 60604-4135</p>

Debtor 1

RESURGENT Capital Services # 654231780 \$ 500.00	Resurgent Capital Services P.O. Box 510090 Livonia, MI 48151-6090
City of Chicago Department of Finance # 5202778760 \$ 500.00	City of Chicago Department of Finance P.O. Box 88292 Chicago, IL 60680-1292
Illinois Tollway # VN5500175956 \$ 600.00	Illinois Tollway P.O. Box 5544 Chicago, IL 60680-5544
Professional Account Management # 67806445 # 02526161030332 \$ 500.00	Professional Account Management LLC P.O. Box 741 Milwaukee, WI 53201-1487
Illinois Tollway # VS5700242249 \$ 1000.00	Illinois Tollway P.O. Box 5544 Chicago, IL 60680-5544
MW536 Midwest Title Loans Inc 17350 Torrence Ave. # 536-16461 #536-16461 \$ 15,000.00	MW536 Midwest Title Loans, Inc 17350 Torrence Ave Lansing, IL 60438 (708) - 474 - 3237
Illinois Tollway # VN5900263425 \$ 300.00	Illinois Tollway P.O. Box 5544 Chicago, IL 60680-5544
Accounting Department Richard J. Daley Center # 08CS002068 # 1994 D 0068138 \$ 500.00	Accounting Department Richard J. Daley Center 50 W. Washington Street Room 1005 Chicago, IL 60602-2701
Title Max 19384 South Halsted Street # 344 - 58 - 9484 \$ 5000.00	Title Max 19384 South Halsted Street Glenwood, IL 60425 (708) 754 - 1645
Trident Asset Management LLC # 61903218 # 9008592015 \$ 1000.00	Trident Asset Management, LLC P.O. Box 888424 Atlanta, GA 30356-0424 (866) 695-8893

Debtor 1

Illinois Tollway # VWS100186032 \$ 500.00	Illinois Tollway P.O. Box 5544 Chicago, IL 60680-5544
Trident Asset Management # 9009277551 \$ 1000.00	Trident Asset Management P.O. Box 888424 Atlanta, GA 30356-0424
Municipal Collection Services # 0002223559 \$ 500.00	Municipal Collection Services P.O. Box 327 Palos Heights, IL 60463-0327
Cook County Department of Revenue # 9707235 \$ 1000.00	Cook County Department of Revenue Individual use Tax 25766 Network Place Chicago, IL 60673-1257
Superior Court of Lake County # 45D12-1512-F6-00225 \$ 5000.00	Lake County Superior Court 232 Russell St. Hammond, IN 46320
FingerHUT # 3192907906 \$ 1000.00	FingerHUT 6250 Ridgewood Road St. Cloud, MN 56303
Caine & Weiner # 72700 \$ 5000.00	Caine & Weiner P.O. Box 55848 Sherman Oaks, CA 91413
Grant Mercantile Agency # 8PROMD10607 \$ 5000.00	Grant Mercantile Agency 49099 Road 426 Oakhurst, CA 93644-9486
Komyatte & Casbon P.C. # 266644* 5 \$ 500.00	Komyatte & Casbon P.C. Donna Sharp Collection Dept. 9650 Gordon Dr. Highland, IN 46322
Trident Asset Management # 900928 \$ 1000.00	Trident Asset Management P.O. Box 888424 Atlanta, GA 30356-0424

Debtor 1

ARS # 82286984 \$1,000.00	ARS 1643 NW 136 th AVE Building H suite 100 Sunrise, FL 33323
Consumer Portfolio Services # 4001355**** \$ 20,000.00	Consumer Portfolio Services 19500 Jamboree RD st. 500 IRVINE, CA 92612
1 Illinois Title Loans # 344-58-9484 \$ 5,000.00	Illinois Title Loans, INC 17310 Torrence Ave Lansing, IL 60438 (708) 889-0503
1 Ameri Cash Loans # 344-58-9484 \$ 5,000.00	Ameri Cash Loans 17340 Torrence Ave Lansing, IL 60438 (708) 474-7448
1 Advance America # 344-58-9484 \$ 5,000.00	Advance America 4142 167 th St. Ste 6 Oak Forest, IL 60452 (708) 596-2599
PNC Bank # 48-1083-1277 \$ 1,000.00	P. N. C. Bank Customer Service P.O. Box 609 Pittsburgh, PA 15230-9738
1 Peachtree Financial # 344-58-9484 \$ 30,000	Peachtree Financial Solutions 1200 Morris Drive Chesterbrook, PA 19087 1-(800) 903-1696
Oasis Financial # 344-58-9484 \$ 30,000	Oasis Financial 9525 W. Bryn Mawr, Ste 900 Rosemont, IL 60018 1-866-663-9894
Professional Account Management # 67806445 \$ 500.00	Professional Account Management P.O. Box 741 Milwaukee, WI 53201-1487 (888) 266-1384
Circuit Court of Cook County # 2016-D-V7798701 \$ 2,000.00	Circuit Court of Cook County Rm 1006 R. J. Daley Center 50 W. Randolph Street Chicago, IL 60602

Clerk of the Circuit Court #TH003726 \$ 1,000.00	Clerk of the Circuit Court Traffic Division Daley Center 50 W. Washington Room 0403 Chicago, IL 60602-1340
City of Chicago Department of Finance # 6044672994 \$ 1,000.00	City of Chicago Department of Finance P.O. Box 88292 Chicago, IL 60680-1292
Bank of America # 291009835577 \$ 1,000.00	Bank of America P.O. Box 790087 St. Louis, Mo 63179
Penn Credit # C 3863901 \$ 1,000.00	Penn Credit 916 S 14th Street P.O. Box 988 Harrisburg, PA 17108-0988
Nicorgas.com # 18-35-66-3381-0 \$ 1,000.00	Nicorgas P.O. Box 5407 Carol Stream, IL 60197
Com-ED # 0696826061 \$ 1,000.00	Com-ED P.O. Box 6111 Carol Stream, IL 60187
Ridge Orthopedics and Rehab # 27489 \$ 1,000.00	Ridge Orthopedics and Rehab 5540 W. 111th Street Oak Law, IL 60453-5574
Harris & Harris. LTD # 44863622 \$ 3,000.00	Harris & Harris LTD. 111 West Jackson Blu. Ste 400 Chicago, IL 60604-4135
Secretary of State # YE 474482 # S-536-1655-9351 \$ 1,000.00	Mandatory Insurance Division 501 South Second St. RM 429 Springfield, IL 62756
City of Chicago. Department of Finance # 5022548800 \$ 500.00	City of Chicago Department of Finance P.O. Box 88292 Chicago, IL 60680-1292

Debtor 1

AMERICAN ACCESS CASUALTY COMPANY # 12AU001296964 \$ 5,000.00	AMERICAN ACCESS CASUALTY COMPANY 2211 BUTTERFIELD RD. STE 200 DOWNERS GROVE, IL 60515-1493
CLEARSPRING # 50635232 # 09977898361 \$ 2,000.00	CLEARSPRING LOAN SERVICES, INC P. O. BOX 4869 DEPT #447 HOUSTON, TX 77057
INGALLS # 2863667-1 \$ 5,000.00	INGALLS ONE INGALLS DRIVE HARVEY, IL 60426-3558
SECRETARY OF STATE # S586-1655-9351 # 2X69561 # 45GRB72E31A253479 \$ 2,000.00	MANDATORY INSURANCE DIVISION OFFICE OF THE SECRETARY OF STATE OF ILLINOIS 500 S. 2ND ST. ROOM 429 SPRINGFIELD, IL 62756
T-MOBILE # 945763706 \$ 500.00	T-MOBILE P.O. BOX 53410 BELLEVUE, WA 98015-3410
CERTIFIED SERVICES # 660277 \$ 2,000	CERTIFIED SERVICES 1300 SHOKIE HWY SUITE 103 A GURNEE, IL 60031
COOK COUNTY DEPARTMENT OF REVENUE # 9558750 \$ 500.00	COOK COUNTY DEPARTMENT OF REVENUE 25766 NETWORK PLACE CHICAGO, IL 60673-1257
C.M.I. # 6197 * * * * \$ 1,000.00	C.M.I. 4200 INTERNATIONAL PARK WAY CARROLLTON, TX 75007-1912
MIDLAND CREDIT MANAGEMENT # 5178059218315621 \$ 2,000.00	MIDLAND CREDIT MANAGEMENT 2365 NORTHSIDE DRIVE SUITE 300 SAN DIEGO, CA 92108
ILLINOIS DEPARTMENT OF REVENUE # 344-58-9484 # L1704724D16 \$ 5,000.00	ILLINOIS DEPARTMENT OF REVENUE P.O. BOX 19035 SPRINGFIELD, IL 62794-9035

Debtor 1

State of Illinois Department of Revenue # 45-4532919 # P15752589 \$ 5,000.00	Illinois Department of Revenue P.O. Box 19035 Springfield, IL 62794-9035
Department of the Treasury # 344-58-9484 \$ 10,000	Department of the treasury Internal Revenue Service Kansas City, MO 64999-0010
Cook County Sixth Municipal District # 17C660438 \$ 2,000.00	Cook County Sixth Municipal 16501 Medzie Ave Markham, IL 60428
U.S. Department of Education # 2382832 \$ 3,000.00	U.S. Department of Education P.O. Box 87130 Lincoln, NE 68501-7130
Heart Land D.C.S.I. # 344589484 \$ 5,000.00	Heart Land D.C.S.I. 100 Global View DR. Warrendale, PA 15086